

CLAIMS ONLY

SERIAL NO. _____

FILING DATE _____

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2	1					
3	1					
4	1					
5	1					
6	1					
7	1					
8	1					
9	1					
10	1					
11	1					
12	1					
13	1					
14	1					
15	1					
16	1					
17	1					
18	1					
19	1					
20	1					
21	1					
22	1					
23	1	X				
24	1	X				
25	1	X				
26	1	X				
27	1	X				
28	1	X				
29	1	X				
30	1	X				
31	1	X				
32	1	X				
33	1					
34	1					
35	1					
36	1					
37	1					
38	1	X				
39	1	X				
40	1	X				
41	1	X				
42	1	X				
43	1	X				
44	1	X				
45						
46						
47						
48						
49						
50						
TOTAL IND.	2		1		1	
TOTAL DEP.	19		1		1	
TOTAL CLAIMS	21		1		1	

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
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99						
100						
TOTAL IND.			1		1	
TOTAL DEP.			1		1	
TOTAL CLAIMS			1		1	

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS